UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))

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Attorney Docket No.	00684.003549	2.S
First Nam	ed Inventor or Application Identifier	72
SUMITADA YAMAMOTO		386
Express Mail Label No.		22

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APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450							
1. X	Fee Transmit (Submit an orig	tal Form jinal, and a duplicate for fee pr	ocessing)		7.	CD-ROM or Program (Ap	CD-R in duplicate,	large table or Co	mputer	
2.	Applicant clai See 37 CFR	aims small entity status. R 1.27.			8.		e and/or Amino Acid Sequence Submission ole, all necessary)			
3. X	Specification	Total Pag	ges 27			a. C	computer Readable	Form (CRF)		
4. X 5	Drawing(s) (3					i (ation Sequence Listi CD-ROM or CD-R (paper			
	a. Ne	wly executed (original or co	py)			c S	statements verifying	identity of above	copies	
						ACCOM	PANYING APPLIC	ATION PARTS		
6. X	[(fo	-	Box 17 completed) /ENTOR(S) ached deleting inventous eplication, see 37 CFR b).		9.	37 CFR 3.73 (when there English Tran Information I Statement (I Preliminary I Return Rece (Should be s Certified Cop	DS)/PTO-1449	Powe (if applicable) X Copie Citati P 503)	r of Attorne es of IDS ons	y
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: Continuation Divisional Continuation-in-part (CIP) Frior application information: Examiner Continuation-in-part (CIP) Group/Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.					<u>/</u> be					
18. CORRESPONDENCE ADDRESS										
х	X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below									
NAME									··	
Address										
City			State				Zip Code			
Country			Telephone				Fax			

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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	9-20 =	0	X \$ 18.00 =	\$0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	2-3 =	0	X \$ 86.00 =	\$0.00
	MULTIPLE DEPENDEN	T CLAIMS (if applicable) (37 CFR 1.16(d))		\$290.00 =	\$290.00
				BASIC FEE (37 CFR 1.16(a))	
			Total of	above Calculations =	\$1060.00
	Reduction by	50% for filing by small er	tity (Note 37 CFR 1.9,	1.27, 1.28).	
		61.1		TOTAL =	\$1060.00
9. Sn a.	nall entity status A small er	ntity statement is enclose	d		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Gary M. Jacobs - Reg. No. 28,861			
SIGNATURE	Day Jarobs			
DATE	November 28, 2003			

GMJ/kkv

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